	OIPE		B - FEE(S) TRA		. EEE			
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42754 NIELDS & LE 176 EAST MAI WESTBORO, M	N STREET, SUITE			Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unit States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimit transmitted to the USPTO (571) 273-2885, on the date indicated below.				
11/06/2007 WARDELR3	0000001 10689121			Kevi	n S. Lemack	(Depositor's nam		
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APPLICATION NO.	FILING DATE	U UP	FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/689,121	10/20/2003		William Kopaciew	icz	MCA-617	2908		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I					
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/08/2007		
EXAMINER A		ART UNIT	CLASS-SUBCLAS	<u> </u>				
	WAYNE K	1743	422-102000					
CFR 1.363).				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Nields & Lemack				
☐ Change of corresp Address form PTO/SI	ondence address (or Cha B/122) attached.	nge of Correspondence	or agents OR, alte	single firm (having as	a member a 2			
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	lication (or "Fee Address' 02 or more recent) attach	Indication form ed. Use of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	ND RESIDENCE DATA			- JF - /				
PLEASE NOTE: Uni	less an assignee is identi th in 37 CFR 3.11. Comp	fied below, no assignee letion of this form is NO	data will appear on t T a substitute for filin	he patent. If an assigi g an assignment.	nee is identified below, the	document has been filed f		
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY and STATE OR	COUNTRY)	•		
Millipor	e Corporation		Bille	erica, Massac	husetts			
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🗘 C	orporation or other private	group entity Governme		
4a. The following fee(s)	are submitted:	. 41		· •••	ny previously paid issue fo	ee shown above)		
Issue Fee	No small entity discount p	armittad)	XI A check is enclosed. Payment by credit card. Form PTO-2038 is attached.					
Advance Order -	# of Copies10		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-0930 (enclose an extra copy of this form).					
5. Change in Entity Sta	tus (from status indicated as SMALL ENTITY statu		☐ b. Applicant is n	o longer claiming SMA	LL ENTITY status. Sec 37	CFR 1.27(g)(2).		

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Kevin S. Lemack Typed or printed name

Registration No. 32,579

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A. S.	NSH O	Application Number	10/689,121		
TRANSMITTA PADE MARKET PORM		Filing Date	October 20, 2003 William Kopaciewicz		
		First Named Inventor			
		Art Unit	1743		
(to be used for all correspondence after initial t	filing)	Examiner Name	Handy, Dwayne K.		
Total Number of Pages in This Submission 5	5	Attorney Docket Number	MCA-617		

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ENCLOSURES (Check all that apply)								
✓		smittal Form		Drawing(s)		After Allowance Communication to TC Appeal Communication to Board		
Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD		Address	of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): -Issue Fee Transmittal Letter -Part B - Issue Fee Transmittal Form			
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Rem	narks				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name Nields & Lemack								
Signature // // // // // // // // // // // // //								
Printed name Kevin S. Lemack								
Date		October 31, 2007			Reg. No.	32,579		
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IN TREMINETED STATES PATENT AND TRADEMARK OFFICE

In re application of

Group Art Unit: 1743

William Kopaciewicz et al.

Examiner: Handy, Dwayne K.

Serial No.: 10/689,121

Filed: October 20, 2003

Allowance Date: 8/8/2007

Case No: MCA-617

Confirmation No: 2908

Customer No: 42754

For:

MULTI-SIDED IMMERSION FORMATION OF COMPOSITE STRUCTURES AND

METHOD

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LETTER OF TRANSMITTAL

Please accept the attached Issue Fee Transmittal sheet PTOL-85B and a check in the amount of \$1770.00 in payment of the issue fee, publication fee and the advanced order fee for the above application.

Authorization is given to charge any deficiencies or credit any overpayment to Deposit Account No. 14-0930.

Please notify Applicant's attorney if any problems should arise.

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Respectfully submitted,

Kevin S. Lemack
Attorney for Applicants
Registration No. 32,579
Nields & Lemack

176 E. Main Street Westboro, MA 01581 TEL: (508) 898-1818

Signature: Kevin S. Lemack
Date: October 31, 2007

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

Telephone 508-898-1818

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Complete if Known Effective on 12/08/2004 pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/689,121 TRANSMITT*A* Filing Date October 20, 2003 For FY 2008 First Named Inventor William Kopaciewicz **Examiner Name** Handy, Dwayne K. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1743 TOTAL AMOUNT OF PAYMENT 1770.00 Attorney Docket No. MCA-617 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 14-0930 Deposit Account Name: Nields & Lemack For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES **SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 210 510 255 105 Design 210 105 100 50 130 65 Plant 210 105 310 155 160 80 Reissue 310 155 510 620 255 310 210 Provisional 105 0 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) **Fee Description** Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims** Fee Paid (\$) Multiple Dependent Claims Extra Claims Fee (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets Extra Sheets** Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Issue Fee, Publication Fee & Advanced Order Fee - 10 \$1770.00 SUBMITTED BY Registration No. 32,579

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(Attomey/Agent)

Signature

Name (Print/Type) Kevin S. Lemack